

**CALLAWAY COUNTY ENVIRONMENTAL SANITATION
ON-SITE SEWAGE DISPOSAL SYSTEM PERMIT APPLICATION**

3. Proposed system continued

Alternative System

Type: _____ Low Pressure Pipe System _____ Single Pass Sand Filter _____ Wetlands
 _____ Mound System _____ Drip Irrigation _____ Other

MUST INCLUDE Professional Engineer's design and other supporting information

Registered Installer

Name: _____ Phone#: (____) _____ - _____
Address: _____ Cell # (____) _____ - _____
City: _____ State: _____ Zip Code _____
Installer's ID # _____

Signature of Owner

All the information contained in and with this application is true and accurate to the best of my knowledge

Signed: _____ Date: _____

OFFICE USE ONLY

Site Visits

Date _____	EPHS _____
Date _____	EPHS _____
Date _____	EPHS _____

Confirmation of Lagoon fencing _____ Date _____

Comments:

**Final Installation Approval: The above system has ben inspected and complies with CCHD Ordinance 701.
This in no way guarantees the continued performance of the system.**

EPHS _____ # _____ Date: _____

**CALLAWAY COUNTY ENVIRONMENTAL SANITATION
ON-SITE SEWAGE DISPOSAL SYSTEM PERMIT APPLICATION**

Site Layout

1. Show all property lines and dimensions to reflect the shape and shize of the property.
2. Diagram proposed system. Show appropriate elevations to indicate proper fall for system.
3. Show distance to house, well, water lines, property lines, geological features such as sinkholes, rock outcrops, lakes, ponds, creeks, etc.
4. Show distance to neighbor's wells, homes, etc.
5. Show locations of all soil evaluation test pits.
6. Indicate any known easements that exist for utilities, roads, private driveways or other easements.